

**California In-Hospital Breastfeeding as Indicated on the Newborn Screening Test Form
Statewide, County and Hospital of Occurrence by Infant Race/Ethnicity: 2004**

	State/County/Facility Name	Infant Race/Ethnicity	Total Known Feeding	Any Breastfeeding	Exclusive Breastfeeding	% Any Breastfeeding	% Exclusive Breastfeeding
State	CALIFORNIA	African-American	26,141	18,314	7,981	70.1	30.5
State	CALIFORNIA	American Indian	542	415	249	76.6	45.9
State	CALIFORNIA	Asian	43,553	36,557	17,422	83.9	40.0
State	CALIFORNIA	Hispanic	270,248	225,842	78,303	83.6	29.0
State	CALIFORNIA	Multi-Race/Other	31,438	26,345	16,127	83.8	51.3
State	CALIFORNIA	Pacific Islander	788	538	216	68.3	27.4
State	CALIFORNIA	White	144,335	125,905	89,126	87.2	61.8
State	CALIFORNIA	Missing	4,514	3,537	2,014	78.4	44.6
State	CALIFORNIA	TOTAL	521,559	437,453	211,438	83.9	40.5
County	SONOMA	African-American	58	50	36	86.2	62.1
County	SONOMA	Asian	150	138	77	92.0	51.3
County	SONOMA	Hispanic	2,556	2,419	1,695	94.6	66.3
County	SONOMA	Multi-Race/Other	346	324	234	93.6	67.6
County	SONOMA	White	2,636	2,480	1,967	94.1	74.6
County	SONOMA	Missing	46	41	31	89.1	67.4
County	SONOMA	TOTAL	5,811	5,464	4,049	94.0	69.7
Facility	PETALUMA VALLEY HOSPITAL	Hispanic	272	266	212	97.8	77.9
Facility	PETALUMA VALLEY HOSPITAL	White	183	170	155	92.9	84.7
Facility	PETALUMA VALLEY HOSPITAL	TOTAL	503	480	399	95.4	79.3
Facility	SANTA ROSA KAISER	Asian	47	44	27	93.6	57.5
Facility	SANTA ROSA KAISER	Hispanic	621	579	322	93.2	51.9
Facility	SANTA ROSA KAISER	Multi-Race/Other	139	132	85	95.0	61.2
Facility	SANTA ROSA KAISER	White	911	853	623	93.6	68.4
Facility	SANTA ROSA KAISER	TOTAL	1,736	1,622	1,066	93.4	61.4
Facility	SANTA ROSA MEMORIAL HOSPITAL	Asian	34	30	9	88.2	*
Facility	SANTA ROSA MEMORIAL HOSPITAL	Hispanic	403	363	217	90.1	53.9
Facility	SANTA ROSA MEMORIAL HOSPITAL	Multi-Race/Other	94	86	66	91.5	70.2
Facility	SANTA ROSA MEMORIAL HOSPITAL	White	805	766	603	95.2	74.9
Facility	SANTA ROSA MEMORIAL HOSPITAL	TOTAL	1,372	1,275	916	92.9	66.8
Facility	SONOMA VALLEY DISTRICT HOSPITAL	Hispanic	139	129	72	92.8	51.8
Facility	SONOMA VALLEY DISTRICT HOSPITAL	White	62	58	44	93.6	71.0
Facility	SONOMA VALLEY DISTRICT HOSPITAL	TOTAL	216	201	124	93.1	57.4

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	State/County/Facility Name	Infant Race/Ethnicity	Total Known Feeding	Any Breastfeeding	Exclusive Breastfeeding	% Any Breastfeeding	% Exclusive Breastfeeding
Facility	SUTTER MEDICAL CENTER OF SANTA ROSA	Asian	46	43	26	93.5	56.5
Facility	SUTTER MEDICAL CENTER OF SANTA ROSA	Hispanic	1,119	1,080	870	96.5	77.8
Facility	SUTTER MEDICAL CENTER OF SANTA ROSA	Multi-Race/Other	78	74	60	94.9	76.9
Facility	SUTTER MEDICAL CENTER OF SANTA ROSA	White	650	608	518	93.5	79.7
Facility	SUTTER MEDICAL CENTER OF SANTA ROSA	Missing	29	26	21	89.7	72.4
Facility	SUTTER MEDICAL CENTER OF SANTA ROSA	TOTAL	1,955	1,857	1,516	95.0	77.5

Data Source: Genetic Disease Branch, Newborn Screening Data, 2004

- Note 1: Data shown only for facilities listed as 'Regular Maternity', 'Kaiser', 'Alternative Birth Center', 'Pediatric', and 'Military' in the newborn screening database.
- Note 2: Infant race/ethnicity is based upon mother and father race/ethnicity as recorded on the birth certificate.
- Note 3: Data for facilities and counties with fewer than 25 total births with known type of feeding are not shown.
- Note 4: Percents of any and exclusive breastfeeding are not shown for fewer than 20 events.
- Note 5: Numbers of any and exclusive breastfeeding are not shown for fewer than 5 events.
- Note 6: "Any Breastfeeding" includes those exclusively breastfeeding and those supplementing breastfeeding with formula. "Exclusive Breastfeeding" includes those who breastfeed only.
- Note 7: Breastfeeding initiation rates vary widely by maternal characteristics. Data presented in these tables are not risk adjusted. Comparisons between facilities or among geographic locations should be made cautiously.
- Note 8: The data used to develop these tables are from the California Newborn Screening Program database of the Genetic Disease Branch. All nonmilitary hospitals are required to complete the Newborn Screening Test Form (DHS 4409) prior to an infant's discharge. Upon completing the form, staff must select one of the following five categories describing 'all feedings since birth' (not including water feedings): (1) Breast only; (2) Formula only; (3) Breast and Formula; (4) TPN/Hyperal and (5) Other.
- Note 9: The denominator used to compute the percent any and percent exclusive breastfeeding data is "Total Known Feeding". Births with missing or unknown method of feeding are excluded. In 2004, 2.78% of all births in California had missing or unknown feeding data.